

APPLICATION FOR JUDICIAL BRANCH FEDERAL EMPLOYMENT

1. Title of position applied for		2. Type of position applied for <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Full Time <input type="checkbox"/> Part time		3. Office location in which you wish to work <input type="checkbox"/> Wilson <input type="checkbox"/> Raleigh <input type="checkbox"/> Either location			
4. Name (Last, First, Middle Initial)			5. Other names previously used				
6. Present Address _____ _____				7. Telephone numbers Home _____ Work _____			
8. Social Security No.	9. Date of Birth	10. Place of Birth: City : _____ State: _____ Foreign Country: _____					
11. Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No Country of your Citizenship _____ 12. a. Were you ever a Federal civilian employee? <input type="checkbox"/> No <input type="checkbox"/> Yes Highest civilian grade: Grade _____ Level _____ b. Are you receiving a Federal annuity payment? <input type="checkbox"/> No <input type="checkbox"/> Yes 13. Do you have any relatives that are Judges, Officers or employees of the United States Court? If so, give their names, positions, and relationship to you _____ _____							
14. Have you ever been discharged from a position or asked to resign under the threat of discharge? <input type="checkbox"/> No <input type="checkbox"/> Yes, explain under remarks at the end of this form. 15. Have you ever been convicted? <input type="checkbox"/> No <input type="checkbox"/> Yes, explain under remarks at the end of this form. (You may omit [1] Offenses committed before your 18th birthday and adjudicated under a juvenile offender law; [2] offenses adjudicated under a youth offender law; [3] offenses as to which the record has been expunged; [4] minor traffic violations for which you paid a fine of \$100 or less.)							
EDUCATION 16. a. Do you have a high school or G.E.D. equivalent? <input type="checkbox"/> No <input type="checkbox"/> Yes Date of completion _____ School Name _____ City _____ State _____							
b. Name & Location of colleges/universities attended		Dates Attended	Major	No. of Credit Hrs.	Degree	Date Received	GPA or Class Rank
c. Are you admitted to the Bar? <input type="checkbox"/> No <input type="checkbox"/> Yes List the Bar(s) to which admitted, dates of admission, and if your membership is active/inactive? _____ _____							
d. Did you attend a Bar review course? <input type="checkbox"/> No <input type="checkbox"/> Yes List type of courses and dates attended: _____ _____							

e. List other schools or training such as trade, vocational, Armed Forces, or business.

Name & Location of School	Dates Attended	Subject Studied	Certificates	Other Pertinent Dates & Info.

f. Special skills, accomplishments, awards, honors, fraternities, sororities: _____

17. What is the lowest pay you will accept? (You will not be considered for jobs which pay less than you indicate) \$

REMARKS (Use this space for continuation of answers. List the number of item being continued)

This image shows a single page of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

REFERENCES

List three people who know your qualifications and fitness for the kind of job for which you are applying and who are not related to you and are not previous supervisors.

Full Name of Reference	Telephone Number	Present Business or Home Address	Relationship To You

Work Experience

Including experience while in military service

(Start with your present position and work back 10 years. Use additional pages if necessary.)

A

[illegible]

B

[illegible]

C

Work Experience Continued

Dates of Employment (month, day, year) From _____ To _____	No. of Hours Worked Per Week	Exact Title of Your Position	No. of Employees You Supervised
Salary or Earnings Starting \$ _____ per _____ Final \$ _____ per _____	Classification Grade & Level (if Federal Serv)	Place of Employment City _____ State/Country _____	Kind of Business or Organization
Employer (firm, organization, etc.) Name _____ Address _____		Immediate Supervisor Name _____ Title _____ Telephone No. _____	
Reason for Leaving:			
Description of Work: Describe your specific duties, responsibilities and accomplishments in this job, including the job title(s) of any employees you supervise. If you describe more than one type of work, write the approximate percentage of time you spent doing each.			

D

Dates of Employment (month, day, year) From _____ To _____	No. of Hours Worked Per Week	Exact Title of Your Position	No. of Employees You Supervised
Salary or Earnings Starting \$ _____ per _____ Final \$ _____ per _____	Classification Grade & Level (if Federal Serv)	Place of Employment City _____ State/Country _____	Kind of Business or Organization
Employer (firm, organization, etc.) Name _____ Address _____		Immediate Supervisor Name _____ Title _____ Telephone No. _____	
Reason for Leaving:			
Description of Work: Describe your specific duties, responsibilities and accomplishments in this job, including the job title(s) of any employees you supervise. If you describe more than one type of work, write the approximate percentage of time you spent doing each.			

APPLICANT CERTIFICATION

I certify that, to the best of my knowledge and belief, all of the information on and attached to this application is true, correct, complete and made in good faith. I understand that false or fraudulent information on or attached to this application may be grounds for not hiring me, or firing me after I begin work, and may be punishable by fine or imprisonment. I understand that any information I give may be investigated.

SIGNATURE:

DATE:

Work Experience Continued

E

Dates of Employment (month, day, year) From _____ To _____	No. of Hours Worked Per Week	Exact Title of Your Position	No. of Employees You Supervised
Salary or Earnings Starting \$ _____ per _____ Final \$ _____ per _____	Classification Grade & Level (if Federal Serv)	Place of Employment City _____ State/Country _____	Kind of Business or Organization
Employer (firm, organization, etc.) Name _____ Address _____ _____		Immediate Supervisor Name _____ Title _____ Telephone No. _____	
Reason for Leaving:			
Description of Work: Describe your specific duties, responsibilities and accomplishments in this job, including the job title(s) of any employees you supervise. If you describe more than one type of work, write the approximate percentage of time you spent doing each.			

F

Dates of Employment (month, day, year) From _____ To _____	No. of Hours Worked Per Week	Exact Title of Your Position	No. of Employees You Supervised
Salary or Earnings Starting \$ _____ per _____ Final \$ _____ per _____	Classification Grade & Level (if Federal Serv)	Place of Employment City _____ State/Country _____	Kind of Business or Organization
Employer (firm, organization, etc.) Name _____ Address _____ _____		Immediate Supervisor Name _____ Title _____ Telephone No. _____	
Reason for Leaving:			
Description of Work: Describe your specific duties, responsibilities and accomplishments in this job, including the job title(s) of any employees you supervise. If you describe more than one type of work, write the approximate percentage of time you spent doing each. _____ _____ _____ _____ _____			

Work Experience Continued

G

[illegible]

H

[illegible]